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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/571,600	07/05/2006	Ahd Hamidi	2001-1437	9771
466	7590	05/14/2009	EXAMINER	
YOUNG & THOMPSON			ARCHIE, NINA	
209 Madison Street				
Suite 500				
ALEXANDRIA, VA 22314			ART UNIT	PAPER NUMBER
			1645	
			MAIL DATE	
			05/14/2009	
			DELIVERY MODE	
			PAPER	

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Interview Summary	Application No.	Applicant(s)
	10/571,600	HAMIDI ET AL.
Examiner	Art Unit	
Nina A. Archie	1645	

All participants (applicant, applicant's representative, PTO personnel):

(1) Nina A. Archie

(3) MARK NAVARRO

(2) Robert Gouzner

(4) _____

Date of Interview: 7/24/08

Type: a) Telephonic b) Video Conference
c) Personal [copy given to: 1) applicant 2) applicant's representative]

Exhibit shown or demonstration conducted: d) Yes e) No.

If Yes, brief description: _____

Claim(s) discussed: all claims of record

Identification of prior art discussed: no all of record specifically Ellwood et al

Agreement with respect to the claims f) was reached. g) was not reached. h) N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: discussion of cut in reference to claims
Examiner will take into consideration the steps of invention in re
(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.) to Ellwood et al,

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

Examiner's signature, if required

